## State of Maine Procurement Justification Form

This form must accompany all contract requests and sole source requisitions (RQS) over \$5,000 submitted to the Division of Procurement Services.

INSTRUCTIONS: Please provide the requested information in the white spaces below. All responses (except signatures) must be typed; no hand-written forms will be accepted. See the guidance document posted with this form on the Division of Procurement Services website (Forms page) for additional instructions.

PART I: OVERVIEW							
Department Office/Division/Program:			Maine State Board of Nursing				
Department Contract Administrator or Grant Coordinator:			Kim Esquibel				
(If applicable) Department Reference #:							
Amo (Contract/Amendment/Gr		\$ 120,000	Advantage (		OT / RQS #: CT 02N 20:		220623*3474
CONTRACT	Pr	oposed Start Date:	0.	7/01/2022	Proposed End Date:		06/30/2023
AMENDMENT	Original Start Date:				Effective Date:		
	F	Previous End Date:				End Date:	
GRANT		Project Start Date:		Grant Start Da		Start Date:	
		Project End Date:			Grant End Date:		
Vendor/Provider/Grantee Name, City, State:		Maine Medical Professionals Health Program ("MPHP") Maine Medical Association Manchester, ME Monitoring, screening, documentation, treatment referral and					
Brief Description of Goods/Services/Grant:			advocacy of nurses in remission from chemical dependency/substance use/behavioral health, including regular urine/blood testing and group/individual therapy.				

	PART II: JUSTIFICATION FOR VENDOR SELECTION						
Mark an "X" before the justification(s) that applies to this request. (Check all that apply.)							
	A. Competitive Process	G. Grant					
	B. Amendment	H. State Statute/Agency Directed					
Х	C. Single Source/Unique Vendor	I. Federal Agency Directed					
	D. Proprietary/Copyright/Patents	J. Willing and Qualified					
	E. Emergency	K. Client Choice					
	F. University Cooperative Project	L. Other Authorization					

Please respond to ALL of the following:

1. Provide a more detailed description and explain the need for the goods, services or grant to supplement the response in Part I.

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#### PART III: SUPPLEMENTAL INFORMATION

The program is operated within the state to assist nurses challenged with substance use, mental health, and behavioral issues. If these nurses are not treated with a supervised, individualized program of recovery, it might result in a risk to the public.

Although there are for profit and non-profit entities which operate programs for recovery from chemical, mental or physical impairment within the state, there are none designed and statutorily empowered to provide the unique program tailored to licensed nurses except that presently provided by the contractor under the terms of the statutes and protocols referred to in this contract. The protection of the public, and simultaneous regulation of the recovering nurse provided by this contractual arrangement, do not conform to statute if another entity is contracted with.

### 2. Provide a brief justification for the selected vendor to supplement the response in Part II.

There is no other program of this nature available to nurses in Maine, whereby they may retain their licenses and practice safely while recovering. The program also intervenes with nurses who may be becoming impaired to interrupt progression of their disease. Prior to inception of this program, nurses had to seek help out-of-state on their own or be disciplined by license sanction after their impairment was discovered.

Services provided under the contract are not available to Maine licensed nurses from any other State of Maine agency. Provisions of services rendered under this contract have no impact on state employees, civil service, or otherwise.

## 3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.

The Maine Medical Professionals Health Program is also utilized by healthcare professionals in medicine, dentistry, osteopathy, and pharmacy throughout the state. The program is funded through state licensing boards, professional associations, medical staffs, and malpractice carriers. Participant fees also account for a significant portion of the operating budget. The Board of Nursing contract is paid with 100% Dedicated Revenue from licensing fees. No General Fund Revenues are used. Each year the vendor has provided an annual report to the Board, both in writing and in a discussion forum. Costs have been discussed openly. The program has been used by the Board for many years and the Board has been satisfied with the vendor's performance.

### 4. Describe the plan for future competition for the goods or services.

MPHP is a program designed for healthcare (medical) professionals {physicians, nurses, pharmacists, dentists} in Maine. It would be resource intensive to try to find another vendor. MPHP is unique in its services.

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PART IV: APPROVALS								
Signature of requesting Department's Commissioner (or designee):	By signing below, I signify that I approve of this procurement request.							
Printed Name:	Kim Esquibel	Date:	06/23/2022					
Signature of DAFS Procurement Official:	—DocuSigned by:  Delbie Jacques							
Printed Name:	1DFA565D481F42E Debbie Jacques	Date:	6/30/2022					